



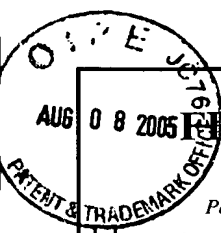
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/668,969
	Filing Date	September 24, 2003
	First Named Inventor	Akira ISHIKAWA
	Group Art Unit	2818
	Examiner Name	Thao P. le
Total Number of Pages in This Submission	Attorney Docket Number	740756-2653

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <u>PTO-1449 Form w/2 documents</u>
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	<u>Luan C. Do, Reg. No. 38,434</u> Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	August 8, 2005

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Date	Signature
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FREE TRANSMITTAL FOR FY 2005 <i>Patent fees are subject to annual revision.</i> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<i>Complete if Known</i>		
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TOTAL AMOUNT OF PAYMENT (\$)		1250.00	Attorney Docket No.	740756-2653

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																																																																																
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SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Luan C. Do	Registration No. (Attorney/Agent)	38,434
Signature		Telephone	(202) 585-8000
		Date	August 8, 2005

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